

*Welcome to*

## **CALIFORNIA ANIMAL CARE**



**Seeking a  
permanent,  
loving,  
responsible  
home  
for all  
companion  
animals.**



**SO THAT WE MAY BE ASSURED** that the animal you wish to adopt is best suited to you, your home and your lifestyle, and is placed in an environment that is compatible with his/her needs, we ask you to complete this application.

**FOR YOU TO ADOPT AN ANIMAL, WE NEED YOU TO . . .**

- Be sure that you are financially able to provide for the animal's needs. This includes food, supplies and veterinary care.
- Be certain you have adequate time to spend with your new pet, including time for training, exercise and grooming. Plan for a minimum of one hour per day.
- Have your landlord's permission to bring an animal into his/her property.
- Have consent of all adults in your household.
- Be at least 18 years of age and have verifiable identification.
- Complete this application and discuss it with an adoption counselor.
- Understand that this is an adoption, not a sale. California Animal Care reserves the right to postpone or refuse an adoption.

*Thank you!*

## People / Animal Companion Profile

Welcome to California Animal Care. This application is designed to help us help you make the best possible choice: The right home for each animal and the right animal for your home. Please reply to the following questions carefully and completely.

### Household Information

Name \_\_\_\_\_

Driver's License # \_\_\_\_\_ State \_\_\_\_\_ Identification \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Housing: Own \_\_\_\_ Rent \_\_\_\_ Live w/Parent \_\_\_\_ House \_\_\_\_ Condo \_\_\_\_ Apt \_\_\_\_ Mobile \_\_\_\_

Landlord Name \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_

Length of Time at Address \_\_\_\_\_

Others Living in Household (including ages of children) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Pet History

Who is your Animal's Veterinarian? \_\_\_\_\_

What Animals do you Currently Own: (list below) \_\_\_\_\_

Species _____	Species _____	Species _____
Age _____ Sex _____	Age _____ Sex _____	Age _____ Sex _____
Altered? _____	Altered? _____	Altered? _____
Kept: In ____ Out ____ Both ____	Kept: In ____ Out ____ Both ____	Kept: In ____ Out ____ Both ____

How long have you had this/these animals? \_\_\_\_\_

What inoculations have your current animals had in the past year?

\_\_\_\_\_

What is your experience with animals?

First-time Owner \_\_\_\_ Have had One or Two \_\_\_\_ Knowledgeable and Experienced \_\_\_\_

Please rate your Household Activity Level:

Grand Central Station \_\_\_\_ Couch Potato \_\_\_\_ Somewhere in Between \_\_\_\_

## Hopes and Expectations

Why are you interested in adopting an animal

What personality traits are you looking for in your companion animal? \_\_\_\_\_

Where will the animal be kept during the day?

Free to roam:   Indoors \_\_\_\_\_ Outdoors \_\_\_\_\_      Caged:   Indoors \_\_\_\_\_      Outdoors \_\_\_\_\_

Where will the animal be kept at night?

Free to roam:   Indoors \_\_\_\_\_ Outdoors \_\_\_\_\_      Caged:   Indoors \_\_\_\_\_      Outdoors \_\_\_\_\_

What steps would you be willing to take to litterbox train your cat?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Adoption Follow-Up

As part of our commitment to having each adoption be a success, we will be keeping in touch with you. Please indicate the most appropriate time and place to reach you.

Time \_\_\_\_\_ Phone \_\_\_\_\_

## Please Read and Sign

I certify that all the information in this application is true and I understand that false information may void the application. I also understand that failure to comply with future requirements, such as spaying or neutering, could result in my inability to adopt other animals from California Animal Care.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## For Staff Use Only

The best match would be: \_\_\_\_\_

Pending \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Landlord Permission \_\_\_\_\_ Obtained \_\_\_\_\_ Denied \_\_\_\_\_

Parental Permission \_\_\_\_\_ Obtained \_\_\_\_\_ Denied \_\_\_\_\_

File Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, reviewed with PA? Yes \_\_\_\_\_ No \_\_\_\_\_

I have reviewed the following small animal-related issues with the potential adopter:  
(please initial each as reviewed)

\_\_\_\_\_ Cages

\_\_\_\_\_ Food

\_\_\_\_\_ Handling / Socialization

\_\_\_\_\_ Litterbox training (rabbits / rats)

\_\_\_\_\_ Chewing

\_\_\_\_\_ Spaying / Neutering

\_\_\_\_\_ Rabbits and Cats / Dogs

Comments \_\_\_\_\_

Adoption counselor reviewing application \_\_\_\_\_ Date \_\_\_\_\_

Animal shown by \_\_\_\_\_ Date \_\_\_\_\_

Additional counselors \_\_\_\_\_ Date \_\_\_\_\_

Adoption finalized Yes \_\_\_\_\_ No \_\_\_\_\_

If no, why not? \_\_\_\_\_